

APPLICATION FOR SEWER PERMIT

CITY OF FRANKFORT SEWER DEPARTMENT
1200 KENTUCKY AVENUE
FRANKFORT KY 40601

Telephone: 502/875-2448 Fax: 502/223-7857

Date_____

Subdivision_____

Phase_____
(if project is in phases)

Block/Lot No._____

Section_____
(if project is in sections)

Water Meter Size_____

Sewer Tap Building Address_____

Applicant_____

Plumber_____

Address_____

Address_____

Telephone No._____

Telephone No._____

Property Owner Signature_____